Results Currently a work in progress and we are in the process of evaluating this work.

Conclusion A culture of engagement is more likely to predict performance than any other variables including competence (Alimo-Metcalfe & Bradley, 2010). Through discussion and exploration we are able to expand upon learning and explore decision making. Disseminated learning allows for more openness and transparency amongst the team. There is a shift from the perception of a ‘blame culture’ to one of collaboration, inclusiveness and participation. Including staff who delivered the front-line care in these scenarios and discussions further enriches the process.

P-160 THE BOTTOM LINE – NO PRESSURE!
Anne Marie Jones. Garden House Hospice Care, Letchworth Garden City, UK
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Managing pressure injuries within palliative care patients has been shown to be challenging due to, decreased nutritional intake, reduced mobility and increasing frailty resulting from co-morbidities. Included in this would be patients taking steroids and those with complications from treatment which would compromise their skin integrity. Due to high numbers of patients being admitted to the inpatient unit with pressure injuries it was felt that reducing further deterioration of their pressure areas was paramount.

Aim The Tissue Viability Link nurse role is to initiate and incorporate creative ways to educate staff about the importance of preventing deterioration of pressure injuries in our patient group and keep staff up-to-date with the latest initiatives.

Method • A tissue viability focus group was developed to look at areas to improve the management of pressure injuries within the hospice
  • A new policy has been devised incorporating the SSKIN algorithm and NICE guidelines
  • Training sessions developed and delivered at nursing handovers and at away days
  • A laminated pocket guide produced to enable staff to grade pressure injuries. An enlarged version of this was made for all the patient folders
  • A patient and carer information leaflet produced about managing pressure injuries
  • Heel mirrors purchased and informative sign produced so staff are reminded to use them
  • Guidelines on type of wound dressings produced to streamline which dressings would be used
  • ‘The Bottom line’ newsletter published bi-monthly covering relevant information for staff, interesting facts, ‘Don’t forget’ section, ‘News in Brief’ section to keep staff updated
  • SSKIN charts which are helping to prompt staff with repositioning our patients.

Results Mini audit and Hospice UK audits carried out have shown that the staff’s knowledge and ability to recognise and put measures in place to minimise pressure injuries and complete necessary documentation has greatly improved.

Recommendations To continue to publish newsletter for staff and find innovative ways to raise staff awareness about ways to implement preventative measures. To continue to carry out Hospice UK audits within the allocated timeline.